# **Application Data Sheet**

#### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: 2856

Title:: AUTOMATED BANKING MACHINE WHICH

DISPENSES, RECEIVES AND STORES NOTES

AND OTHER FINANCIAL INSTRUMENT SHEETS

Attorney Docket Number:: D-1189

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 20

Total Drawing Sheets:: 24

Small Entity:: No

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Zachary

Middle Name::

Family Name:: Utz

Name Suffix::

City of Residence:: North Canton

State or Province Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 8194 Overwood Avenue

City of mailing address:: North Canton

State or Province of mailing address:: OH

Country of mailing address:: US

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Daniel

Middle Name::

Family Name:: Schoeffler

Name Suffix::

City of Residence:: Twinsburg

State or Province Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 2148 Demi Drive

City of mailing address:: Twinsburg

State or Province of mailing address:: OH

Country of mailing address:: US

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Shawn

Middle Name::

Family Name:: Griggy

Name Suffix::

City of Residence:: North Canton

State or Province Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 2585 Mt. Pleasant NW

City of mailing address:: North Canton

State or Province of mailing address:: OH

Country of mailing address:: US

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Nat

Middle Name::

Family Name:: Ramachandran

Name Suffix::

City of Residence:: Uniontown

State or Province Of Residence:: OH

Country of Residence:: US

Street of mailing address:: 2424 Lyndon Drive

City of mailing address:: Uniontown

State or Province of mailing address:: OH

Country of mailing address:: US

**Inventor Authority Type:**:

Inventor

**Primary Citizenship Country::** 

US

Status::

**Full Capacity** 

Given Name::

Н.

Middle Name::

**Thomas** 

Family Name::

Graef

Name Suffix::

City of Residence::

Bolivar

State or Province Of Residence:: OH

Country of Residence::

US

Street of mailing address::

Box 287

City of mailing address::

**Bolivar** 

State or Province of mailing address::

OH

Country of mailing address::

US

Postal or Zip Code of mailing address::

44612

# **Correspondence Information**

Correspondence Customer Number:: 28995

#### **Representative Information**

Representative Customer Number::	28995

# **Domestic Priority Information**

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	An application claiming	60/419,681	10/18/2002
	the benefit under 35		
	USC		
	§ 119(e)		
This Application	An application claiming	60/435,153	12/19/2002
	the benefit under 35		
	USC		
	§ 119(e)		

# **Assignee Information**

Assignee Name:: Diebold Self-Service Systems

Division of Diebold, Incorporated

City of mailing address:: North Canton

State or Province of mailing address:: OH